

C.L. "BUTCH" OTTER – Governor RICHARD M. ARMSTRONG – Director DEBBY RANSOM, R.N., R.H.I.T – Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, Idaho 83720-036 PHONE: (208) 334-6326 FAX: (208) 364-1888 E-mail: fsb@idhw.state.id.us

January 18, 2007

Sharon Snavely, Administrator Rigby Country Living Center 4202 E 300 North Rigby, ID 83442

License #: RC-359

Dear Ms. Snavely:

On November 7, 2006, a life safety code survey was conducted at Rigby Country Living Center. As a result of that survey, deficient practices were found. The deficiencies were cited at the following level(s):

• Non-core issues, which are described on the Punch List, and for which you have submitted evidence of resolution.

This office is accepting your submitted evidence of resolution.

Should you have questions, please contact Chris Laumann, Health Facility Surveyor, Facility Fire, Life Safety, and Construction Program, at (208) 334-6626.

Sincerely,

CHRIS LAUMANN

Team Leader

Health Facility Surveyor

Facility Fire Safety & Construction Program

CL/slc

c:

Mark Grimes, Supervisor, Facility Fire Safety & Construction Program



JAMES E. RISCH – Governor RICHARD M. ARMSTRONG – Director

DEBBY RANSOM, R.N., R.H.I.T - Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, idaho 83720-036 PHONE: (208) 334-6266 FAX: (208) 364-1888 E-mail: fsb@idhw.state.id.us

November 14, 2006

Sharon Snavely, Administrator Rigby Country Living Center 4202 E 300 North Rigby, ID 83442

Dear Ms. Snavely:

On November 7, 2006, a life safety code survey was conducted at Rigby Country Living Center. The facility was found to be providing a safe environment for its residents.

The enclosed form, stating no core issue deficiencies were cited during the survey, is for your records only and need not be returned.

Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference. The completed punch list form and accompanying proof of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by December 7, 2006.

Should you have any questions about our visit, please contact me at (208) 334-6626.

Sincerely,

MARK GRIMES

Supervisor

Facility Fire Safety & Construction Program

MG/slc

Enclosure

Bureau of Facility Standards

(X3) DATE SURVEY STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION COMPLETED IDENTIFICATION NUMBER: 01 - ENTIRE BUILDING A. BUILDING B. WING_ 13R359 11/07/2006 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 4202 E 300 NORTH **RIGBY COUNTRY LIVING CENTER RIGBY, ID 83442** (X4) ID PREFIX SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE DATE ID (EACH DEFICIENCY MUST BE PRECEEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) R 000 Initial Comments R 000 Surveyor: 22405 The facility was found to be in substantial compliance with the fire and life safety requirements of the Rules for Residential or Assisted Living Facilities in Idaho. No core deficiencies were cited during the standard fire/life safety survey conducted on November 7, 2006. The surveyor conducting the survey was: Chris Laumann Health Facility Surveyor Facility Fire safety & Construction Bureau of Facility Standards TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM 6899 LDJ321 If continuation sheet 1 of 1



BUREAU OF FACILITY STANDARDS P.O. Box 83720 Boise, ID 83720-0036 (208) 334-6626 fax: (208) 364-1888

ASSISTED LIVING Non-Core Issues Punch List

Tall 1		
Facility Name	Physical Address	Phone Number
Rido Countis Living	4202 For 300 North	(208) 745-9096
Administrator	City	ZIP Code
Shoron Snovels	Q1964.	83442
Survey Team Leader	Survey Type 🤍	Survey Date
Chris Lauman	Fire/Life Safety	11/7/06
NON-CORE ISSUES		
ITEM RULE#	DESCRIPTION	DATE RESOLVED

ITEM #	RULE #	DESCRIPTION	DATE RESOLVED
	16.63.22 415.01	Mantenance of Fire/like safety Systems. Hof 4	
	•	exit light were burnt and I in the kitchen and three	
		in the cosider	
~~~~~		emergency lighting is a found to be inspecable in the	
		diving com, and in the Short west hall	
2.	16,03.22,404,01		
		to have penetration in the ceiling I penetration was around	
		the exhaust pipe creating a gap in the Smake resistive	
		Griner measuring Din all around Two other penetrations	
		were coused by vater damage on the forwall were the	
		ceiling neets the wall. This proctection mousined 2 ft by King	40
3	16.03,22,405,01	Electrical installations: One extension cord was found in the	
		utility com Augedinto the light todare. An electrical	
		outlet caper us missing in Room 2, anothe was missing in	
		Rm 5 exposing live wires	

Response Required Date
Signature of Facility Representative
Autom
Signature of Facility Representative